

HAMPSHIRE COUNTY COUNCIL

Decision Report

Decision Maker	Executive Lead Member for Adult Social Care and Public Health
Date:	6 June 2023
Title:	Physical Activity Contain Outbreak Management Fund (COMF) Grants Proposal
Report From:	Director of Public Health

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Purpose of this Report

1. The purpose of this report is to seek approval from the Executive Lead Member for Adult Social Care and Public Health for distribution of up to £1.5 million in grants, to community organisations to deliver physical activity projects across Hampshire, as recommended by an externally procured provider.
2. To delegate authority to the Director of Public Health to award grants for individual projects is also requested.

Recommendations

3. That the Executive Lead Member for Adult Social Care and Public Health approves spend of up to £1.5 million on physical activity grants to be awarded to organisations that promote physical activity across Hampshire.
4. That the Executive Lead Member for Adult Social Care and Public Health delegates authority to the Director of Public Health in consultation with the Executive Lead Member to award grants in line with the criteria as set out in this report.

Executive Summary

5. Physical activity has many benefits for health and wellbeing. The COVID-19 pandemic exacerbated pre-existing health inequalities, and we know that in Hampshire both physical inactivity and obesity increased in areas of greater deprivation and amongst marginalised communities. Being overweight and obese, as well as being physically inactive, increases the risk of adverse health consequences from COVID-19 infection.
6. This paper sets out how the County Council propose to distribute up to £1.5 million in grants to community organisations, to support physical activity projects across Hampshire, through procurement of an externally procured provider, for the purpose of recommending community organisations to receive funding. The source of the proposed funding is the Control Outbreak Management Fund (COMF). The Council must meet the public health duties which mean taking steps appropriate to improve the health of the population in its area.

Contextual information

7. The COMF was provided to English local authorities initially to be used for test, trace and contain activity connected to COVID-19. In December 2022 the Council was informed of a change of criteria¹ due to the formal end of the pandemic and emergency powers. This stated that criteria for use of COMF are now:
 - a. Public health action on the impact of COVID-19 on health outcomes and health inequalities, and
 - b. Public health recovery projects aimed at directly addressing health inequalities
8. There is a requirement that the rationale/business case must be signed off by the Director of Public Health, be taken through local approval processes, and state the public health outcome intended and its link to the impact/recovery from COVID-19 and pandemic related health inequalities.
9. Health inequalities can be defined as 'avoidable, unfair and systematic differences in health between different groups of people'; these differences can include health status, access, quality and experience of care, behavioural risk factors and wider determinants. Health inequalities are often analysed and addressed by policy across four types of factors:
 - socio-economic factors, for example, income
 - geography, for example, region or whether urban or rural

¹ Letter from UKHSA 16/12/22

- specific characteristics including those protected in law, such as sex, ethnicity or disability
- socially excluded groups, for example, people experiencing homelessness.

10. For good physical and mental health, adults should aim to be physically active every day. According to the Chief Medical Officer's Guidelines, adults should undertake at least 150 minutes of moderate intensity activity (such as brisk walking or cycling) each week; or 75 minutes of vigorous intensity activity (such as running). Older adults should also participate in daily physical activity to gain health benefits, including maintenance of good physical and mental health, wellbeing, independence and social functioning. Any level or duration of activity is better than none and brings health and wellbeing benefits. During the COVID-19 pandemic, physical inactivity decreased in the population, with those people from marginalised communities such as those experiencing income deprivation, serious mental ill health, ethnic minority communities and refugees having a greater decrease.
11. Mental health has similarly deteriorated at a population level since the advent of the COVID-19 pandemic; the impacts of social isolation, as well as anxiety around contracting COVID-19, especially amongst those already vulnerable, has been significant. Physical activity in multiple forms has been shown to have positive impacts on mental wellbeing.
12. Those with co-morbidities (such as cardiovascular disease (CVD), cancer and diabetes) may also be more affected by the impact of COVID-19. Physical activity can prevent or help manage a range of long-term conditions.
13. Improving healthy life expectancy and reducing health inequalities are key priorities for Hampshire Public Health as defined in the Hampshire Health and Wellbeing Board Strategy 2019-24, as well as in the Hampshire and Isle of Wight We Can Be Active Physical Activity Strategy 2021.
14. Physical activity also supports ambitions as set out by the Integrated Care Partnerships for Hampshire and Isle of Wight and Frimley alongside the Hampshire Health and Wellbeing Board focus on cardiovascular disease prevention and social isolation.
15. The County Council proposes to procure a provider to recommend projects for which to provide grant funding, following these agreed criteria:
 - a. Physical activity interventions for addressing the impact of COVID-19 on health outcomes and health inequalities
 - b. Physical activity projects aimed at directly addressing health inequalities arising from the pandemic
 - c. Physical activity projects intend to prevent or mitigate health inequalities or unequal impact on populations in future outbreaks

The intention is that those in receipt of the grants ought to be those who work closely with their communities and may have prior experience of delivering physical activity projects in the community. Such provider could be a District/Borough Council, voluntary organisations, leisure providers or other similar organisations.

The provider would be expected to:

- a. Have understanding and experience of projects that support multiple health outcomes i.e., increase physical activity, improved mental wellbeing and social isolation, falls prevention and have positive impacts on healthy weight.
- b. Have understanding and experience of working with areas of deprivation and communities/populations where there are greatest health inequalities, with an understanding of the context of Hampshire as a whole.
- c. Have understanding and experience of working with/delivering sustainable projects designed to future proof communities, create resilience and deliver innovation.
- d. Have sufficient understanding and experience to ensure that robust monitoring of delivery and evaluation of effectiveness are built into the process.
- e. Open a grant round in order to advertise grant opportunities to prospective applicants, ensuring the process is fair and transparent.

Finance

16. The purpose of this report is to seek approval from the Executive Lead Member for Adult Social Care and Public Health for distribution of up to £1.5 million in grants, to community organisations who would support physical activity projects across Hampshire, as recommended by an externally procured provider. This figure includes the amount paid to the procured service provider, meaning there is up to £1.5 million available for grants.
17. This grant funding, less the fee for the service provider, would be held by the County Council. The service provider and the County Council intend to enter an agreement whereby the Director of Public Health, with delegated authority, would be able to approve releasing funds for grant applications, as recommended by the service provider.
18. Procurement processes would be followed for obtaining a contract with the provider organisation, and using the criteria as provided above to, the upper limit of £100,000 in line with the County Council's approval processes.

19. All grants made would comply with the COMF criteria, as defined in the contextual information above.

Grants would be expected to be allocated by the end of the 2023/24 financial year.

Performance

20. There would be robust monitoring and evaluation mechanisms in place between a. the County Council and the provider organisation, and b. provider organisation and grant recipients, to ensure the monies are spent appropriately to improve the health of the Hampshire population. This monitoring and evaluation would be achieved through design of a robust service specification outlining key performance indicators (KPIs) for the provider organisation to achieve, and contract management meetings to ensure consistent dialogue.
21. Each programme or project utilising this fund would have its own monitoring and evaluation associated with it. The provider organisation would be expected to monitor the spend by organisations to which grants are made.
22. The provision of grants to voluntary and community sector organisations by statutory bodies always presents a degree of risk. Specific risks that statutory bodies are required to manage include voluntary and community organisations accepting funding without providing any activity; organisations not delivering the service as expected; and there being an under spend on the expected activity. This applies to all grants however; larger grants represent a potentially higher risk to the County Council.
23. A number of mechanisms have been employed successfully over a number of years to mitigate and alleviate these risks.
24. All organisations awarded a grant sign a declaration stating they accept that grant funding can only be awarded for the given period and no commitment exists from the County Council to continue funding after this time, or in subsequent years.
25. Section 2B of the NHS Act 2006 states that 'Each local authority must take such steps as it considers appropriate for improving the health of the people in its area.' and that 'steps that may be taken under subsection (1) also include providing grants or loans (on such terms as the local authority considers appropriate).'

Consultation and Equalities

26. The proposed grant pot would increase capacity and capability in community organisations who are successful in bidding for grant money, which would result in physical activity being more accessible to children and adults experiencing health inequalities. Examples of communities experiencing health inequalities include deprived communities and those experiencing mental illness. These communities are more likely to be from ethnic backgrounds and to live with disability.

Climate Change Impact Assessment:

Carbon Mitigation

27. Hampshire County Council utilises two decision-making tools to assess the carbon emissions and resilience impacts of its projects and decisions. These tools provide a clear, robust, and transparent way of assessing how projects, policies and initiatives contribute towards the County Council's climate change targets of being carbon neutral and resilient to the impacts of a 2°C temperature rise by 2050. This process ensures that climate change considerations are built into everything the Authority does.
28. The carbon mitigation tool and/or climate change adaptation tool were not applicable because the decision is essentially strategic/administrative in nature and does not have any climate change considerations.

Conclusions

29. Physical activity has many health and wellbeing benefits, however more deprived communities and marginalised populations are less likely to participate in physical activity, which was exacerbated over the COVID-19 pandemic. This paper sets out a proposed grant process with the aim of increasing physical activity with a particular focus on these populations/communities in Hampshire.

REQUIRED CORPORATE AND LEGAL INFORMATION:

Links to the Strategic Plan

Hampshire maintains strong and sustainable economic growth and prosperity:	no
People in Hampshire live safe, healthy and independent lives:	yes
People in Hampshire enjoy a rich and diverse environment:	no
People in Hampshire enjoy being part of strong, inclusive communities:	yes

EQUALITIES IMPACT ASSESSMENT:

1. Equality Duty

The County Council has a duty under Section 149 of the Equality Act 2010 ('the Act') to have due regard in the exercise of its functions to the need to:

- Eliminate discrimination, harassment and victimisation and any other conduct prohibited by or under the Act with regard to the protected characteristics as set out in section 4 of the Act (age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation);
- Advance equality of opportunity between persons who share a relevant protected characteristic within section 149(7) of the Act (age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex and sexual orientation) and those who do not share it;
- Foster good relations between persons who share a relevant protected characteristic within section 149(7) of the Act (see above) and persons who do not share it.

Due regard in this context involves having due regard in particular to:

- The need to remove or minimise disadvantages suffered by persons sharing a relevant protected characteristic that are connected to that characteristic;
- Take steps to meet the needs of persons sharing a relevant protected characteristic that are different from the needs of persons who do not share it;
- Encourage persons sharing a relevant protected characteristic to participate in public life or in any other activity in which participation by such persons is disproportionately low.

2. Equalities Impact Assessment

The purpose of these grants would be to reduce health inequalities, as defined in the COMF criteria. An Equalities Impact Assessment was conducted and it was deemed that there would be no negative effects on persons who share a relevant protected characteristic.